



Registrationform

Workshop

Course Title:

Date of the Training:

Location:

Tuition:

Billing Information

Company:

Name:

Street:

Zip Code, City:

Country:

N.I.F./ID/Passport number:
(for Invoice)

Contact Information

Home Phone:

Business Phone:

Cellphone:

Fax:

E-mail:

Payment (20% at registration, the rest 30 days before the seminar starts)

Cash Credit Card Bank Transfer

• Bank: Solbank • Account Holder: Miamar Productions S.L.U. • IBAN: ES4500810549330001187225 • BIC/SWIFT: BSABESBB •

Abschluss

Comments:
 [Empty text box for comments]

Location, Date, Signature

Please e-mail this document to info@globalcoachingnetwork.net or fax it to +34 971 33 88 29

• Global Coaching Network • C./Fray Vicente Nicolas N34 bajos, local 2 • 07800 Ibiza • Balearic Islands, Spain •
 • info@globalcoachingnetwork.net • Phone: +34 971 339 616 • Fax: +34 971 33 88 29 •



Credit Card Charge Authorization

Credit Card Information

Name on Credit Card:

Visa

Master Card

Credit Card Number:

Expiration Date: Security Code:

Signature:

Authorization

I, _____ authorize Miamar Productions (the holding company of GCN) to charge my Credit Card the total amount of _____ € for the seminar _____

Signature _____

Comments

Comments:
[Empty text box]

Please fax this document to +34 971 33 88 29

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